Statement of

Mary A. Dix
Vice President for Administration and Management
Uniformed Services University of the Health Sciences
Department of Defense

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(CARES)
Commission

on
USUHS/OSD/VA Collaborative Initiative
For Sharing WMD-Related Training and Expertise

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Mr. Chairman, I am pleased to be here to testify before the Department of Veterans Affairs (VA) Capital Asset Realignment for Enhanced Services (CARES) Commission on the development, current status, and proposed implementation of a collaborative initiative for the cost-effective provision, via the Internet, of quality-assured, web-based training and expertise for the medical response to weapons of mass destruction (WMD). The WMD-related training and expertise would be shared by the collaborating entities and transmitted to the uniformed and civilian emergency responder and health care provider communities across the United States.

The Office of the Secretary of Defense (OSD)'s invitation for the University to participate in the collaborative effort is: 1) relevant to the USUHS mission, as directed by Public Law 92-426 and DoD Directive 5105.45 - to provide military-unique training, leadership, and continuity for the Military Health System; 2) utilizes the internationally-recognized military-unique training and expertise found at USUHS; 3) recognizes six years of successful collaboration between USUHS and the VA; and, 4) combines multiagency resources to ensure economies of scale.

BACKGROUND.

For over 25 years, the Uniformed Services University of the Health Sciences (USUHS) has been at the forefront of WMD-related medical education and has successfully prepared its uniformed graduates to provide military-unique health care and expertise in austere conditions and to respond to injuries caused by chemical, biological, radiation, nuclear, and explosive weapons. Where the average school of medicine (SOM) in the United States offers 13 hours of preventive medicine training, the USUHS SOM provides 130 hours; while the DoD scholarship physicians receive between 50 to 132 contact hours of medical readiness training, the USUHS students receive between 784 and 889 hours. A military-unique focus and operational training exercises are interwoven throughout the SOM curriculum; as a result, USUHS graduates currently represent the medical backbone of the special forces units of the Uniformed Services. Career-committed USUHS graduates with their military-unique education and extraordinary retention rates are providing

quality care, continuity, and leadership throughout the Uniformed Services. In fact, the Association of American Medical Colleges Reporter has twice featured USUHS as the one place where physicians are trained for the medical response to weapons of mass destruction (WMD) in the December issues of 1998 and 2001. Based, in part, upon the unique mission of USUHS, which includes training uniformed officers for the medical response to weapons of mass destruction, Public Law 107-287, the Department of Veterans Affairs (VA) Emergency Preparedness Act of 2002, directed that the VA model its WMD-related medical training after that found at USUHS.

THE ESTABLISHMENT AND DEVELOPMENT OF THE USUHS/OSD/VA COLLABORATIVE INITIATIVE ON EMERGENCY PREPAREDNESS.

DoD and the VA Establish the Committee on Collaborative Initiatives. Public Law 107-287 and the expressed intent of the leadership of both the Department of Defense (DoD) and the Department of Veterans Affairs led to the establishment of an Office of the Secretary of Defense (OSD)/VA Committee to further collaborative initiatives between the two Departments. USUHS was invited to participate in the first meeting of the OSD/VA Committee on collaborative initiatives, which was held on January 22, 2003, directly due to the University's on-going successful, six-year collaborative relationship with the VA. The 20-month VA/USUHS Post-Masters Certificate Nurse Practitioner Distance Learning Program has been recognized as a model for cost-effective collaboration centered in an atmosphere of cooperation, trust, and quality education. At its inception, it was the first program in the Nation to offer a complete nurse practitioner curriculum via distance education. Thus, the OSD/VA Committee recognized that USUHS could play an essential role in the implementation of one of the DoD/VA Collaborative Initiatives, Emergency Preparedness. The OSD/VA Committee had earlier defined this initiative to include the sharing of vital information and training regarding the diagnosis and treatment of injuries or illness that result from exposure to biological, chemical, or radiation exposure. The documented WMD-unique training and expertise found at USUHS, combined with the University's record of successful collaboration with the VA, made USUHS a logical place-holder for the initiative on Emergency Preparedness.

USUHS Centers and Activities Form a Nucleus for the Facilitation of the Collaborative Effort. Three USUHS Centers - the Casualty Care Research Center (CCRC); the Center for Disaster and Humanitarian Assistance Medicine (CDHAM); and, the Center for the Study of Traumatic Stress (CSTS) - would serve as the nucleus for the collaborative initiative. Essential expertise would also be provided by the USUHS Armed Forces Radiobiology Research Institute (AFRRI), the USUHS Graduate School of Nursing, the USUHS SOM academic departments in the basic and clinical sciences, the USUHS Office of Continuing Education for Health Professionals (CHE), the USUHS National Capital Area Medical Simulation Center (SIMCEN), and the USUHS Patient Simulation Laboratory (PSL). All of these USUHS Centers and Activities have developed working relationships and name-recognition with their counterparts throughout DoD, VA, other Federal and State entities, and the civilian sector.

The USUHS Centers and Activities are fine-tuning their specific goals, metrics, and budget requirements for implementing this collaborative initiative with an emphasis on readiness, quality, and efficiency. The customers' perspectives are being identified to strategically position the training and services to meet the defined needs and expectations of the uniformed communities requiring WMD-related training and expertise. For example, on June 11, 2003, USUHS met with representatives from the Reserve Components to determine their immediate requirements for WMD-related training and expertise.

USUHS and VA Coordination Efforts on Emergency Preparedness Expand both Collaborative Participation and the Scope of Service. Since the OSD meeting of January 22, 2003, the list of collaborative participants for sharing WMD-related training and expertise between USUHS and the VA has increased to also include: the Department of Homeland Security; the Office of Health Affairs, Office of the Secretary of Defense (OSD); the Office of Homeland Defense, OSD; the Reserve Components, OSD; the TRICARE Office of the Lead Agent for Region 1, OSD; the Bureau of Navy Medicine and Surgery; the United States Public Health Service; the Department of Health and Human Services; the Association of Academic Health Centers; and, the Hawaii Psychological Association.

USUHS Will Serve as a Facilitator for the Collaborative Sharing of WMD-Related Training and Expertise. Central to the success of this endeavor, is that USUHS will be regarded as a focal point for coordination and implementation requirements and not as the exclusive source of all WMD-related training and expertise. USUHS envisions itself as a facilitator in this collaborative initiative. In addition to their own training packages and expertise, the USUHS Centers and Activities will continuously coordinate and consult with all of the collaborating entities to avoid duplication of effort.

USUHS Would Provide Academic Credibility Through Collaboration with the Association of Academic Health Centers. As a member of the Association of Academic Health Centers (AHC), USUHS is in a unique position for expanding and sharing its academic credibility to further its collaborative assistance to OSD. Discussions with the AHC have already established that the AHC wishes to join USUHS in its collaborative efforts for sharing WMD-related training and expertise. In addition, the Office of the Dean, USUHS School of Medicine, has also initiated collaborative work with the American Medical Association (AMA) on the development of a Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS) model for disaster response training and on other WMD-related training.

THREE BRIEFINGS HAVE BEEN PROVIDED FOR THE DEPARTMENT OF HOMELAND SECURITY, OSD, AND CONGRESSIONAL REPRESENTATIVES.

The Department of Homeland Security Receives a Briefing on the USUHS/VA Collaborative Initiative and the Cost-Effective Use of the Internet. On April 10, 2003, a briefing on the collaborative sharing of WMD-related training and expertise was held at USUHS for the Director of the Office of Emergency Response, Department of Homeland Security. Participants from DoD, VA, the United States Public Health Service (USPHS) and the Reserve Components openly communicated their willingness to share their WMD training, expertise, and satellite broadcasting resources with each other. Discussions centered on the concern that limited funding, on a Nation-wide basis, had generally prevented both the uniformed and civilian emergency responder and health care provider communities from training their personnel following the terrorist attacks on September 11, 2001; and, that recent media coverage has emphasized the general public's growing concern over the inability of those entities to train their personnel for the medical response to a terrorist incident. All participants agreed that the scope of the proposed collaborative effort between DoD and the VA could be vastly increased through the use of the Internet; especially as the WMD-related training and consultation required by the collaborators are largely identical to that required by the civilian emergency responder and health care provider communities. Since that briefing, the Director of the Preparedness Division, Emergency Preparedness and Response Directorate, Department of Homeland Security, has also indicated his interest and support; both Directorates in the Department of Homeland Security have been kept informed on the status of the collaborative initiative.

OSD Representatives Request a Briefing for the Implementation of the VA/USUHS Initiative on Emergency Preparedness. On April 29, 2003, the USUHS Vice President for Administration and Management (VAM) met with representatives from the OSD Offices of Health Affairs and Homeland Defense. Following discussions, the VAM was requested to prepare a briefing/proposal to include justification that: 1) the proposed initiative conforms with the established mission of USUHS; 2) the University is qualified to serve as the facilitator for the initiative; 3) the proposed initiative addresses OSDdirected collaboration with the Department of Veterans Affairs on Emergency Preparedness; 4) the initiative addresses a recognized DoD requirement, in this case, to partner/coordinate, as appropriate, with the Defense Medical Readiness Training Institute (DMRTI) in the provision and assessment of WMD-related training across the Joint Services; 5) the initiative and its objectives will not result in a duplication of ongoing efforts, specifically related to the OSD-tasking assigned to DMRTI; and, 6) the USUHS initiative will assist OSD in its efforts to ensure Economies of Scale for DoD. The identification of objectives and metrics, allocation of funding, and implementation of the USUHS-facilitated OSD/VA Collaborative Initiative would generate cost-effectiveness for DoD, due in large part to the nation-wide sharing of WMDrelated, web-based training and expertise, via the Internet, with the Reserve Components and the National Guard. As recommended by the OSD representatives, the training and consultation should be web-based so that the readily available desk top or laptop computer can access the information globally, providing interactive, self-paced instruction available 24 hours per day. In addition, with the University serving as a focal point for the collaborative initiative, the USUHS briefing also addressed: 1) the preparation of WMDrelated training and expertise in a web-based format for cost-effective transmission via the Internet; 2) the establishment of, and coordination with, an inclusive Collaborative Review Panel for quality assurance of the WMD-related training before transmission via the Internet by the collaborative venture (the panel will review/exercise oversight for only the training provided under the auspices of the collaborative effort); 3) continuous liaison among the collaborating entities to avoid duplication of effort; 4) source/provideracknowledgement, tracking, certification, outcomes assessment, and record-keeping for the provided training; 5) preparation of bi-annual status reports; 6) provision of a web site that is user-friendly (well organized and requiring limited options to reach the desired information); 7) general oversight for the collaborative initiative; and, 8) funding requirements for meeting the above described requirements and objectives. The USUHS proposal was briefed to the Deputy Assistant Secretary of Defense (Force Health Protection and Readiness) and her senior staff on June 11, 2003.

USUHS/VA Initiative Is Briefed to the Chair, Subcommittee on Oversight and Investigations, House Committee on Veterans Affairs. A briefing on the status of the collaborative initiative between USUHS and the VA was also provided to The Honorable Steve Buyer, Chair, Subcommittee on Oversight and Investigations, House Committee on Veterans Affairs, on June 23, 2003, at the USUHS campus. Prior to, and since the establishment of Public Law 107-287, Congressman Buyer has been continuously interested in the sharing of WMD-related training between the VA and USUHS. Participants from USUHS and the VA once more communicated their intent to avoid duplication of effort and to share their WMD-related training, expertise, and satellite broadcasting resources with each other. The briefers informed the Congressman, his Congressional staff, and representatives from USUHS, BUMED, the OSD Office of Homeland Defense, the United States Public Health Service, and OSD Legislative Affairs on how the collaborative effort would cost-effectively support uniformed and civilian emergency responder communities and health care providers across the United States. The briefing was well received and assured the Congressman that his on-going support and recognition of the unique WMD-related training and expertise found at USUHS has been validated.

During June of 2003, contacts at the United States Northern Command (NORTHCOM) verified that the USUHS/OSD/VA Collaborative Initiative on sharing WMD-related training is right on target. Should there be a critical homeland security situation, the civilian and uniformed emergency responder and health

care communities will have to work together; if they share the same training that will facilitate their successful collaboration during a crisis.

SUMMARY.

Mr. Chairman, as the Nation directs its limited resources for the medical response to weapons of mass destruction, the cost-effective provision and sharing of appropriate, quality-assured, web-based training and consultative expertise is critically required throughout the uniformed and civilian emergency responder and health care provider communities. Should a terrorist attack on our Nation require the combined support of the uniformed and civilian emergency responder and health care provider communities, the familiarity gained through the sharing of information, training, and expertise generated by this collaborative initiative would greatly assist NORTHCOM as it coordinates the Nation's homeland response.

If the USUHS proposal is selected and funded for implementation as the official OSD/VA Collaborative Initiative on Emergency Preparedness, the USUHS USU Centers and Activities will move expeditiously to coordinate with OSD and their collaborative partners to facilitate the cost-effective, Nation-wide transmission of critically required WMD-related training and expertise. Accordingly, the Economies of Scale that could result from this collaborative effort are limitless. Federal and civilian organizations would share curriculum, resources, and expertise; and, cost-effectiveness would be extraordinary and continuous.

This concludes my statement. I will be happy to respond to any questions that you or other members of the Commission might have.